

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 NOV -1 PM 1:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000065193

1. Corporation Name

MIND AND SPIRIT, INC.

2. Principal Office Address

5231 RENOIR DRIVE

Suite, Apt. #, etc.

City & State

ORLANDO FLORIDA

Zip

32818

Country

3. Mailing Office Address

5231 RENOIR DR

Suite, Apt. #, etc.

City & State

ORLANDO FLORIDA

Zip

32818

Country

REINSTATEMENT 03-04

4. Date Incorporated or Qualified

To Do Business in Florida 06/12/2002

5. FEI Number

20-0619127

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

JEAN CANICIEN

Street Address (P.O. Box Number is Not Acceptable)

5231 RENOIR DRIVE

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32818

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

*Canicien Jean*

Date 10/27/2004

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	JEAN CANICIEN	5231 RENOIR DRIVE	ORLANDO FL 32818

900042365439  
11/01/04--01082--001 \*\*300.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Canicien Jean*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/27/2004

Date

Daytime Phone #

CR2E081 (01/04)

5231 Renoir Drive  
Orlando, FL 32818

October 27, 2004

Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314-6327

Dear Sir/Madam:

**Re: MIND AND SPIRIT, INC.**  
**Document #: P02000065193**

We did not receive our prior uniform business report notices for year 2003 and 2004 and would like the reinstatement fees to be waived and our corporation reinstated. Enclosed, is our completed application for re-instatement and our check in the amount of \$300.00 which represents the filing fees for years 2003 and 2004.

Your assistance is greatly appreciated.

Sincerely  
**Mind and Spirit, Inc.**

*Canicien Jean*

**Jean Canicien**  
**President**